

U.P. AREA AGENCY ON AGING/UPCAP
 FY 2020-2022 MULTI-YEAR RFP SERVICES FOR OLDER ADULTS APPLICATION

SERVICE REQUEST & DESCRIPTION
For
TRANSPORTATION

Applicant/Organization’s Name:

Geographic Area to be Served:

Funding Sources: Discretionary

Reference: AASA Operating Standard for Service Programs VII. A-6

Unit of Service: One, one-way trip per person

Instructions: Read the following service standards and check (X) the boxes in the ‘Agree’ column to indicate if the organization agrees to abide by that standard. Asterisks in the ‘Agree’ column indicate the need to respond to the statement or question in bold italics. Responses should be typed in the text box given. *Note: Refer to AASA Operating Standards for Service Programs for more information.*

ALL questions must be completed. Any questions not completed may delay or prohibit approval of this application.

	Agree (X)
Definitions & Service Delivery	
1. All drivers and vehicles used in transportation programs supported all or in part by Older Americans Act funds must be appropriately licensed and inspected as required by the Secretary of State and all vehicles must be covered by liability insurance. <i>Describe how your agency ensures these requirements are met, including documentation retained for this purpose:</i>	<input type="checkbox"/> *
2. All paid drivers for transportation programs shall be physically capable and willing to assist persons requiring help to and from and to get in and out of vehicles. <i>Describe your policy for drivers to assist persons during transport:</i>	<input type="checkbox"/> *
3. All paid drivers for transportation programs shall be trained to cope with medical emergencies, unless expressly prohibited by a labor contract or insurance policy. <i>How will you ensure paid drivers meet this requirement?</i>	<input type="checkbox"/> *

<p>4. Each program shall attempt to receive reimbursement from other funding sources, as appropriate and available. Describe your collaboration with other entities who may provide funding for transportation services:</p>	<input type="checkbox"/> *
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Please answer these additional questions specific to the delivery of Transportation services:

A. Describe the type of transportation program you will offer, including the mode of transportation utilized (demand/response, public transit reimbursement, and/or volunteer reimbursement), and whether you will use paid and/or volunteer drivers:

B. Indicate why you feel providing this service is important in your geographical area. Specifically, how will it impact socially isolated, low-income and/or minority individuals?
Please provide your area's demographic data, recent outcomes achieved, etc. to explain your answers.

C. If not using volunteer drivers, have you considered doing so? YES NO
If yes, explain your plan for utilizing volunteer drivers.

If no, explain why you are not considering using volunteer drivers:

D. Will any part of the proposed service be sub-contracted? YES NO

If yes, please explain: